FÖRM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# **FORM D**

PEC 2 1 20 NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
20 NOTICE OF SALE OF SECURITIES

RECEIVED



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SEC USE ONLY				
Prefix Ser				
DATE RECEIVED				

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)			
FilmMates Corporation			
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE		
Type of Filing: New Filing  Amendment			
A. BASIC IDENTIFICATION DATA			
1. Enter the information requested about the issuer			
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)			
FilmMates Corporation			
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)		
11965 Venice Boulevard, Suite 305, Los Angeles, CA 90066	(310) 578-6599		
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)		
(if different from Executive Offices)			
SAME	SAME		
Brief Description of Business			
Acquisition and distribution of feature length motion pictures.			
Type of Business Organization	POMMERRE		
	please specify):		
business trust limited partnership, to be formed	please specify): PROCESSED  DEC 2.2.2004		
Month Year	<b>*</b>		
Actual or Estimated Date of Incorporation or Organization: 11 01  Actual Esti Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Stat	mated THOMSON		
CN for Canada; FN for other foreign jurisdiction)	e: FINANCIAL		
or for canada, 117 for only foreign jurisdiction)	[의 -		

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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		A. BASIC II	DENTIFICATION DATA		
<ul><li>Each beneficial ow</li><li>Each executive off</li></ul>	he issuer, if the issuer having the powicer and director o	suer has been organized wer to vote or dispose, or o	within the past five years; direct the vote or disposition of corporate general and ma		a class of equity securities of the issuer. Partnership issuers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	<b>✓</b> Director	General and/or
Check Box(es) that Apply.	Fromoter	Beneficial Owner	Executive Officer	Director	Managing Partner
Full Name (Last name first, i Goda, Alan	f individual)				
Business or Residence Addre 11965 Venice Boulevard	•	Street, City, State, Zip ( Angeles, CA 90066			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip (	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

	B. INFORMATION ABOUT OFFERING					
1.	Use the issuer sold, or does the issuer intend to sall, to non-accredited investors in this offering?					
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?					
2.	What is the minimum investment that will be accepted from any individual?	\$ 5,0	00.00			
-	The second secon	Yes	No			
3.	Does the offering permit joint ownership of a single unit?					
4.	. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.					
	Name (Last name first, if individual)	colling co	mmissions			
	uer is able to engage any licensed broker-dealer(s) on a "best efforts" basis, issuer will pay them up to 10% ess or Residence Address (Number and Street, City, State, Zip Code)	selling cor	TIMISSIONS			
	p to 3% for a non-accountable expense allowance.					
	of Associated Broker or Dealer					
Sta	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
	Check "All States" or check individual States)	[] Al	Il States			
	AL AK AZ AR CA CO CT DE DC EL GA  V. DW MA KE KY LA ME MO MA MI MN  MT NE NV NH MI NM NW LC ND QH QX  VI SC SD DN DX VT VT VT VA WA WV WI	MS QR WY	MO PA PR			
Ful	Name (Last name first, if individual)					
Bus	ess or Residence Address (Number and Street, City, State, Zip Code)					
Nai	of Associated Broker or Dealer					
Sta	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers	<u> </u>				
	Check "All States" or check individual States)		Il States			
	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	HI MS OR WY	MO PA PR			
Ful	Name (Last name first, if individual)					
Bus	ess or Residence Address (Number and Street, City, State, Zip Code)					
Nai	of Associated Broker or Dealer					
Sta	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers	<del></del>				
	(Check "All States" or check individual States)					
	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	HI MS OR WY	MO PA PR			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Pric	e	Amount Already Sold
	Debt	§ 0.00		\$
	Equity		00	s 1,170,000.00
	✓ Common Preferred			
	Convertible Securities (including warrants)	§ 0.00		\$
	Partnership Interests		_	\$
	Other (Specify)	-	_	\$
	Total	5,000,000.	00	\$ 1,170,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ	_	Ψ
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	30		\$ <u>1,170,000.00</u>
	Non-accredited Investors	0		\$
	Total (for filings under Rule 504 only)	30		\$ 1,170,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A		_	\$
	Rule 504		_	\$
	Total		_	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs		<b>7</b>	§_25,000.00
	Legal Fees		<b>/</b>	\$_25,000.00
	Accounting Fees		Z	\$_10,000.00
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately) PAYABLE TO LLCENSED BACKER-DE	ALERS	$ \mathbf{V} $	\$ 500,000.00
	Other Expenses (Identity)		<u> </u>	\$ 250,000.00
	Total ACCOUNTABLE EXPENSE, OFFERING ADMINISTRATION EXPENSE	S, ETC.)		\$_810,000.00

. ` '	C. OFFERING PRICE, NUMB	BER OF INVESTORS, EXPENSES AND USE OF PI	ROCEEDS		
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — C proceeds to the issuer."	•		\$4,190,000.00	
5.	Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross			
			Payments to Officers, Directors, & Affiliates	Payments to Others	
	Salaries and fees		\$ 300,000.00	\$	
	Purchase of real estate		\$_0.00	<b></b> \$	
	Purchase, rental or leasing and installation of mach and equipment	ninery	]\$	<b>Z</b> \$ 25,000.00	
	Construction or leasing of plant buildings and faci	lities	]\$	\$ 180,000.00	
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another	\$_0.00	<b>\$</b>	
	Repayment of indebtedness		\$_0.00	\$	
	Working capital		<b>]</b> \$		
	Other (specify): film completion and distribution		\$	\$ 3,180,000.00	
	organizational expenses; film project evaluation	and analysis; and film marketing	\$_5,000.00	<b>Z</b> \$ 1,000,000.00	
	Column Totals		\$_305,000.00	\$_4,485,000.00	
	Total Payments Listed (column totals added)		. \$\(\frac{4,790,000.00}{}\)		
		D. FEDERAL SIGNATURE			
sigi	issuer has duly caused this notice to be signed by the pature constitutes an undertaking by the issuer to furninformation furnished by the issuer to any non-accr	nish to the U.S. Securities and Exchange Commiss	sion, upon writter		
รรเ	er (Print or Type)	Signature D	ate /	/	
Fili	nMates Corporation	All	12/15/0	of the state of th	
Var	ne of Signer (Print or Type)	Title of Signer (Print or Type)	- July		
lar	Goda	President & CEO			
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ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)